

The upward trend in AIDS case rates was observed for metropolitan areas and several of the non-metropolitan regions, such as Northeast and Northwest Tennessee. Some of the non-metropolitan regions with lower case rates showed rate fluctuations. These fluctuations are not necessarily related to definitional changes, but may be related to the instability associated with small case numbers.

The region with the highest AIDS case rate for 1994 was Davidson at 33.5. Shelby's rate of 28.7 per 100,000 was second, followed by Knox (20.5) and Hamilton (19.8) Counties. Rates for 1995 followed the same relative trends with the exception of low 1995 rates for Knox County which may well be a product of reporting lag. The highest case rates in 1995 were 43.2 per 100,000 in Davidson County, 28.8 per 100,000 in Shelby County, and 27.2 per 100,000 in Hamilton County (Table 2.6.1).

Among the non-metropolitan county clusters, highest rates are observed for 1994 for Northwest Tennessee (8.6), Southwest Tennessee (7.7) and the Mid Cumberland region (6.2). Lowest 1994 rates are observed for East Tennessee (4.2 per 100,000). Noting that 1995 rates are computed as of March, 1996, such regional comparisons should be undertaken with care. Nevertheless, highest AIDS case rates for 1995 for non-metropolitan regions are observed for Northeast Tennessee at 12.4. Lowest 1995 rates are shown for East and Mid Cumberland non-metropolitan regions, at 4.7 and 4.8, respectively.

Although rates cannot be computed for cumulative cases, annual case rates are important, as they control for differences in population size. The fact that the Davidson rate per 100,000 population exceeded the rate for Shelby is important, since Shelby had the highest case numbers and the largest percentage share of AIDS cases regionally throughout the observation period (Table 2.6.2).

On the other hand, Madison County, which had the smallest percentage of regional AIDS cases (1.3%), ranked fourth in AIDS cases per 100,000 population in 1995. East Tennessee ranked sixth among regions in proportion of AIDS cases in 1990-1995 (4%) yet had the lowest AIDS case rate in 1995 at 4.7 per 100,000 (Table 2.6.2). Such differences in regional ranking based on these two measures underscores the importance of using rates to control for population size where possible and exercising caution in interpreting annual rates based on provisional data.